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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE OFFICE OF PETITIONS

Applicant(s):	J. Mitchell et al.	Examiner	Jingge Wu
Serial No.	10/063,424	Group Art Unit	2623
Filed	April 23, 2002	Docket No.	BLD902005US2
TITLE	METHOD, SYSTEM, AND PROGRAM FOR ERROR RECOVERY WHILE DECODING COMPRESSED DATA		

CERTIFICATE UNDER 37 CFR 1.8:

I hereby certify that this correspondence is being transmitted by facsimile to the U.S. Patent and Trademark Office at 571-273-0025 on March 8, 2006.

David W. Victor

PETITION TO WITHDRAW FROM ISSUE UNDER 37 C.F.R. 1.313(c)(2)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Examiner:

Applicants petition under 37 CFR 1.313(c)(2) to withdraw the above application from issue. Applicants are filing a Request for Continued Examination (copy attached) in compliance with 37 C.F.R. 1.114(a)(1) and are submitting an Information Disclosure Statement (copy attached) with the Request for Continued Examination under 37 C.F.R. 1.114 (c).

A petition fee under 37 C.F.R. 1.17(i) in the amount of \$130 may be charged to Deposit Account No. 50-3669. If any additional fees are required, please charge Deposit Account No. 50-3669.

03/10/2006 CKHLOK 00000016 503669 10063424

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Serial No. 10/063,424
Docket No. BLD902005US2
Firm No. 36.72C

The attorney of record invites the Examiner to contact him at (310) 553-7975 if the Examiner believes such contact would advance the prosecution of the case.

Dated: March 8, 2006

By: 

David W. Victor
Registration No. 39,867

Please direct all correspondences to:

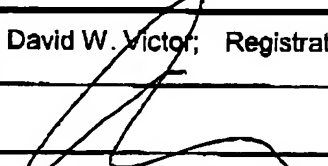
David Victor
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PTO/SB/17
0036.0072C

FEE TRANSMITTAL for FY 2005	Application Number	10/063,424
	Filing Date	April 23, 2002 COPY MAILED
	Inventor	J.L. Mitchell et al. MAR 08 2006
	Group Art Unit	2623 OFFICE OF PETITIONS
Examiner Name		Jingge Wu
Total Amount of Payment: \$ 130.00		Attorney Docket Number BLD920000005US2

METHOD OF PAYMENT (check one) 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the indicated fees and/or credit any overpayments to Deposit Account Number: 50-3669 <input type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Charge any deficiency or credit any overpayment 2. <input type="checkbox"/> Payment enclosed: <input type="checkbox"/> Ck. No. _____ for \$ _____ <input type="checkbox"/> Ck. No. _____ for \$40 <input type="checkbox"/> Credit Card Approval for _____ FEE CALCULATION 1. <input checked="" type="checkbox"/> BASIC FILING FEE Utility Filing Fee: Large Entity Fee Code 1011 \$300.00 2. <input checked="" type="checkbox"/> UTILITY SEARCH FEE \$500.00 3. <input checked="" type="checkbox"/> UTILITY EXAMINATION FEE \$200.00 4. <input checked="" type="checkbox"/> EXTRA CLAIMS FEES Total Claims ____ - 20* x \$50= \$ ____ Ind. Claims ____ - 3* x \$200= \$ ____ Multiple Dependent 0 x \$360= \$0 Subtotal \$ ____ *(or number previously paid for)	FEE CALCULATION (continued) 3. ADDITIONAL FEES (large entity) <input type="checkbox"/> Surcharge- late filing fee or oath \$130 <input type="checkbox"/> Surcharge- late provisional filing fee or cover sheet \$50 <input type="checkbox"/> Non-English specification \$130 <input type="checkbox"/> International type search report \$40 <input type="checkbox"/> Requesting publication of SIR prior to action \$920 <input type="checkbox"/> Requesting publication of SIR after action \$1840 <input type="checkbox"/> Extension for reply- first month \$120 <input type="checkbox"/> Extension for reply- second month \$450 <input type="checkbox"/> Extension for reply- third month \$1020 <input type="checkbox"/> Extension for reply- fourth month \$1590 <input type="checkbox"/> Extension for reply- fifth month \$2160 <input type="checkbox"/> Notice of Appeal \$500 <input type="checkbox"/> Brief in Support of Appeal \$500 <input type="checkbox"/> Request for Oral Hearing \$1000 <input type="checkbox"/> Utility Issue fee \$1400 <input type="checkbox"/> Petition to revive (unavoidable) \$500 <input type="checkbox"/> Petition to revive (unintentional) \$1500 <input checked="" type="checkbox"/> Petitions to the Commissioner \$130 <input type="checkbox"/> Petitions related to provisional applications \$50 <input type="checkbox"/> Submission of Information Disclosure Statement \$180 <input type="checkbox"/> Recordation of Assignment \$40 <input type="checkbox"/> Submission after final (37 CFR 1.129(a)) \$790 <input type="checkbox"/> Request for Continued Examination (RCE) \$790 <input type="checkbox"/> Other: SUBTOTAL \$ 130.00
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Submitted by:

Firm or Individual Name:	David W. Victor; Registration No. 39,867	Customer No. 46917
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MAR 08 2006

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FROM: David W. Victor

OUR REF: 0036.0072C
TELEPHONE: 310-556-7983

Total pages, including cover letter: 15**PTO FAX NUMBER 1-571-273-0025**

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DISCLOSURE STATEMENT
(+COPY); FORM 1449/PTO

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By: 
Name: David W. Victor